

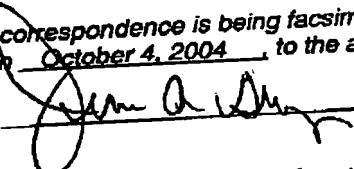
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**TO: Examiner Katherine O'Malley – United States Patent and Trademark Office**

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**FROM: Julia A. Gleazer (Typed or printed name of person signing Certificate)**

 Phone No. (513) 627-4132  
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Listed below are the item(s) being submitted with this Certificate of Transmission:\*\*

- 1) Response (4 pages)
- 2) Fee Transmittal (1 page)
- 3)
- 4)

 Number of Pages Including this Page: 6

Inventor(s): Heilman, et al.

S.N.: 10/697,685

Filed: October 29, 2003

Case: 9398

Comments:

\*\*Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

OCT-04-2004 17:46

## F&amp;HC PATENT DIVISION

5136278118 P.02/06

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL  
for FY 2004

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 110.00)

## Complete If Known

Application Number	10/387,635
Confirmation Number	2815
Filing Date	October 28, 2003
First Named Inventor	Laura Lynn Kellman
Examiner Name	Kathryn S. O'Malley
Art Unit	3740
Attorney Docket No.	9399

## METHOD OF PAYMENT

1. [X] The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:

Deposit Account Number: 16-2480  
Deposit Account Name: The Procter & Gamble Company

## FEE CALCULATION

## 1. BASIC FILING FEE - Large Entity

Code (\$)	Fee Description	Fee Paid
1001 770	Utility filing fee	<input type="checkbox"/>
1002 340	Design filing fee	<input type="checkbox"/>
1004 770	Reissue filing fee	<input type="checkbox"/>
1005 160	Provisional filing fee	<input type="checkbox"/>

SUBTOTAL (1) (\$0)

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE - Large Entity

	Extra Claims	Fee from Below	Fee Paid
Total Claims	0 - 20* = 0 x 0	<input type="checkbox"/>	<input type="checkbox"/>
Independent Claims	0 - 3** = 0 x 0	<input type="checkbox"/>	<input type="checkbox"/>
Multiple Dependant		<input type="checkbox"/>	<input type="checkbox"/> = 0

\*\* or number previously paid, if greater. For Reissues, see below

Code (\$)  
Basic Dependent

1202 18	Claims in excess of 20
1201 88	Independent claims in excess of 3
1203 200	Multiple dependent claim, if not paid
1204 88	"Reissue independent claims over original patent
1205 18	"Reissue claims in excess of 20 & over original patent

SUBTOTAL (2) (\$0)

## 3. ADDITIONAL FEES

Code (\$)	Fee Description	Fee Paid
1061 130	Surcharge-late filing fee or oath	<input type="checkbox"/>
1052 50	Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>
1053 130	Non-English specification	<input type="checkbox"/>
1812 2,520	For filing a request for ex parte reexamination	<input type="checkbox"/>
1804 920*	Requesting publication of SIR prior to Examiner's action <input type="checkbox"/>	<input type="checkbox"/>
1805 1,840*	Requesting publication of SIR after Examiner's action <input type="checkbox"/>	<input checked="" type="checkbox"/>
1251 110	Extension for reply within 1 <sup>st</sup> month	<input type="checkbox"/>
1252 420	Extension for reply within 2 <sup>nd</sup> month	<input type="checkbox"/>
1253 880	Extension for reply within 3 <sup>rd</sup> month	<input type="checkbox"/>
1254 1,460	Extension for reply within 4 <sup>th</sup> month	<input type="checkbox"/>
1255 2,010	Extension for reply within 5 <sup>th</sup> month	<input type="checkbox"/>
1401 330	Notice of Appeal	<input type="checkbox"/>
1402 330	Filing a brief in support of an appeal	<input type="checkbox"/>
1403 280	Request for oral hearing	<input type="checkbox"/>
1451 1,510	Petition to institute a public use proceeding	<input type="checkbox"/>
1452 110	Petition to revive - unavoidable	<input type="checkbox"/>
1453 1,330	Petition to revive - unintentional	<input type="checkbox"/>
1501 1,330	Utility issue fee (or reissue)	<input type="checkbox"/>
1502 480	Design issue fee	<input type="checkbox"/>
1480 130	Petitions to the Commissioner	<input type="checkbox"/>
1807 50	Processing fee under 37 C.F.R. 1.17(q)	<input type="checkbox"/>
1808 180	Submission of Information Disclosure Statement	<input type="checkbox"/>
1809 770	Filing a submission after final rejection (37 CFR § 1.128(a))	<input type="checkbox"/>
1810 770	For each additional invention to be examined (37 CFR § 1.128(b))	<input type="checkbox"/>
1801 770	Request for Continued Examination (RCE)	<input type="checkbox"/>
1802 800	Request for expedited examination of a design application	<input type="checkbox"/>
1454 1330	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 355 (a) or (c)	<input type="checkbox"/>
Other fee (specify) _____		<input type="checkbox"/>
Other fee (specify) _____		<input type="checkbox"/>

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$110)

## SUBMITTED BY

Name (Print/Type)

Jolla A. Glazer

Registration No.

(Attorney/Agent) 41,763

Complete (if applicable)

(513) 627-4132

Telephone

Date October 4, 2004

Signature

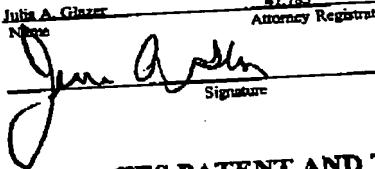
Jolla A. Glazer

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PAGE 2/6 \* RCVD AT 10/4/2004 5:43:25 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-17 \* DNIS:8729306 \* CSID:5136278118 \* DURATION (mm:ss):02-08

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Julie A. Glazer 41783  
Name Attorney Registration Number  
  
Signature

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OCT 04 2004

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**IN RE APPLICATION OF:  
LAURA LYNN HEILMAN**

**SERIAL NO.: 10/697,685**

**FILED: October 29, 2003**

**FOR: FABRIC ARTICLE TREATING  
DEVICE COMPRISING MORE THAN ONE  
HOUSING**

**P&G CASE: 9398**

**: CONFIRMATION NO: 9815**

**: GROUP ART UNIT: 3749**

**: EXAMINER: KATHRYN S. O'MALLEY**

**PETITION FOR ONE MONTH EXTENSION OF TIME AND RESPONSE TO OFFICE  
ACTION DATED JUNE 2, 2004**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-145

Dear Sir:

**INTRODUCTORY COMMENTS**

This is responsive to the Office Action for the above-referenced patent application dated June 2, 2004. Applicants hereby petition for a one month extension of time to respond to this action. This action is being timely filed with a one month extension of time as October 2, 2004 fell on a Saturday. Authorization is provided to charge any fees due hereunder to Deposit Account No. 16-2480. As a matter of review, the instant application is comprised of Claims 1 - 23.

*Remarks begin on page 2 of this paper.*